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TO RUEHC/SECSTATE WASHDC PRIORITY 5390
RUEHPH/CDC ATLANTA GA PRIORITY
INFO RUEAUSA/DEPT OF HHS WASHINGTON DC IMMEDIATE
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RUEHRC/USDA FAS WASHDC
RHEHNSC/NSC WASHDC
RHMFIUU/BUMED WASHINGTON DC
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RHHMUNA/CDR USPACOM HONOLULU HI
RUEKJCS/CJCS WASHDC
RUEHBY/AMEMBASSY CANBERRA 9558
RUEHFR/AMEMBASSY PARIS 0892
RUEHRO/AMEMBASSY ROME 1882
RUEHIN/AIT TAIPEI 1809
RUEHHK/AMCONSUL HONG KONG 2143
RUEHBJ/AMEMBASSY BEIJING 3460
RUEHHM/AMCONSUL HO CHI MINH CITY 0077
RUEHGZ/AMCONSUL GUANGZHOU 0235

UNCLAS SECTION 01 OF 03 JAKARTA 007166

SIPDIS

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SENSITIVE

DEPT FOR EAP/MLS, EAP/IET, A/MED AND S/ES-O
DEPT FOR G/AIAG/JLANGE AND RFENDRICK
DEPT FOR OES/FO, OES/EID, OES/PCI, OES/STC AND OES/IHA
DEPT PASS TO USDA/FAS/DLP/HWETZEL AND FAS/ICD/LAIDIG
DEPT ALSO PASS TO USDA/FAS/FAA/DYOUNG AND USDA/APHIS
DEPT ALSO PASS TO USAID/ANE/CLEMENTS AND GH/CARROLL
DEPT ALSO PASS TO HHS/WSTEIGER/ABHAT/MSTLOUIS
PARIS FOR FAS/AG MINISTER COUNSELOR
CANBERRA FOR APHIS/DHANNAPPEL
ROME FOR FAO
NSC FOR JMELINE
BANGKOK FOR RMO, CDC, USAID/RDM/A
USPACOM ALSO PASS TO J07

E.O. 12958: N/A
TAGS: [TBIO](#) [AMED](#) [CASC](#) [EAGR](#) [AMGT](#) [PGOV](#) [ID](#) [KFLU](#)
SUBJECT: INDONESIA: AVIAN INFLUENZA UPDATE

REF: A) Jakarta 6812 and previous

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1. (SBU) Summary: Over the last four weeks, Indonesian authorities have investigated four potential avian influenza (AI) clusters with assistance from the World Health Organization (WHO) and NAMRU-2. These include the well-documented North Sumatra family cluster that resulted in seven confirmed H5N1 cases; a brother and sister in Bandung, West Java; a family in Solok, West Sumatra; and two children in the Jakarta suburb of Tangerang. Health care workers in Medan and Bandung who reported some association in the treatment of confirmed H5N1-infected patients have been hospitalized, but H5N1 infection has been ruled out. NAMRU-2 and the Ministry of Health (MOH) have determined that a 15-year-old male from Tasikmalaya, West Java who was admitted to a Bandung hospital on May 28 was infected with H5N1. NAMRU-2 and the MOH laboratory continue to collaborate on testing of H5N1 suspects. Despite the increase in human cases, the U.S. Centers for Disease Control and Prevention (CDC) has found no evidence to conclude that the H5N1 virus in Indonesia has changed to become more transmissible. Indonesia currently ranks second in the world in both H5N1 cases (51 confirmed) and deaths (39). End Summary.

Update on Recent AI Clusters

2.(SBU) As of June 7, one patient from the North Sumatra cluster remains hospitalized and will likely recover. Other recent AI cluster activity includes the following:

--The WHO-H5 Reference Center at Hong Kong University has confirmed that an 18-year-old male and 10-year-old female from Bandung, West Java were infected with the H5N1 virus. Both patients died after hospital admission on May 22. The CDC confirmed the 10-year-old female as H5N1 positive. Two nurses who had treated the two siblings at Hasan Sidikin Hospital in Bandung, West Java (reftel) subsequently complained of influenza-like symptoms. However, NAMRU-2 and the MOH laboratory have diagnosed both as H5N1 negative.

--On 22 May, a previously healthy 14-year-old female from Solok, West Sumatra reported to a local health clinic in Bukit Sileh with a fever (six days) and cough. Two of the patient's sisters had died on 14 and 21 May after exhibiting several days of fever, coughing and dyspnea. The clinic referred the patient to M. Djamil Hospital in Padang, where she is currently undergoing treatment for an acute respiratory disease. A MOH team, including a NAMRU-2 clinician, investigated and found that the victims had processed and cooked an ill chicken prior to the development of symptoms. Also, reports of dead and dying birds were evident within the community. NAMRU-2, the MOH and the WHO-H5 Reference Center in Hong Kong have confirmed H5N1 infection in the 14-female, who is recovering. While only a single case was confirmed, this remains a suspected family cluster.

--A 15-year-old male from Tasikmalaya, West Java reported to
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Hasan Sadikin Hospital in Bandung on May 28 with an illness consistent with H5N1 infection. The patient died shortly after admission. Samples analyzed at NAMRU-2, the MOH and Hong Kong University have determined that he was infected with an H5N1 virus.

Conflicting Test Results for Probable AI Cluster

13. (SBU) In addition to the confirmed clusters described above, there have been conflicting test results in the case of probable H5N1 infection in two children from the Jakarta suburb of Tangerang. A five-year-old male and seven-year-old female were afflicted with influenza-like symptoms and respiratory distress after contact with dying poultry in a nearby slaughterhouse. Both were treated at Fatmawati Hospital in Jakarta on May 28. The five-year-old male has died but the seven-year-old female remains alive. However, despite epidemiologic evidence of exposure to dying chickens, after extensive testing, neither NAMRU-2, the CDC, nor the University of Hong Kong have confirmed H5N1 infection from multiple specimens taken from the children. At the same time, tests for H5N1 at the MOH laboratory were positive. NAMRU-2 has cause to believe that the MOH laboratory has experienced a recent problem with specimen contamination.

Nurses H5N1 Negative

14. (SBU) Investigators associated with the WHO have identified two nurses in Medan who had some contact with earlier confirmed H5N1 cases and who complained of mild recent illness. A 42-female nurse reported cough and fever on June 1, and was treated with Tamiflu (oseltamivir) at Adam Malik Hospital in Medan. As of June 7, the nurse has left the hospital and her whereabouts are unknown. A second nurse had showed less specific symptoms on May 28th (sore throat, cough, myalgia, no fever), but had normal x-ray readings and received no Tamiflu treatment. She remains

well. NAMRU-2 and the MOH laboratory have determined that samples from each nurse were negative for H5N1-infection. However, an H1N1, or normal influenza A virus, was found in samples taken from the 42-year old nurse.

15. (SBU) Human influenza A (H1N1) and A (H3N2) and influenza B viruses circulate throughout the year across Indonesia. In the last six months, NAMRU-2 has diagnosed at least five health care professionals who have interacted with H5N1 cases with non-avian, normal human influenza viruses. NAMRU-2 maintains surveillance in 30 sites across Indonesia and provides isolates and information to the WHO Influenza Reference Centers for the purpose of vaccine preparation.

Human AI Case Profile

16. (SBU) In the past week, the number of confirmed H5N1 cases in humans in Indonesia rose from 47 to 51, with 39 deaths. NAMRU-2 data indicates the following AI-related

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case profile as of June 06:

-- Number of laboratory confirmed (positive PCR and/or serology) human AI cases: 51, of which 39 have been fatal (case fatality rate of 76 percent).

-- Number of probable AI cases: 5, with 3 deaths (fatality rate of 60 percent).

-- Number of cases awaiting verification by the US CDC three

-- Number of possible AI cases under investigation: approximately 13.

-- Number of excluded AI cases: 310.

PASCOE